M U N I

COMMENTARY TO HABILITATION THESIS[1]

Stroke represents one of the leading causes of death worldwide. Diagnostic and therapeutic process of patients with acute ischemic stroke has dramatically evolved and has changed over the past decade. In 2015 several randomised controlled trials showed clear benefit of endovascular therapy in patients with acute ischemic stroke with large vessel occlusion in anterior circulation in comparison to standard medical treatment with intravenous thrombolysis and paradigm shift in the treatment of patients with acute ischemic stroke has been made and endovascular treatment has become the gold standard of these patients. This has led to implementation of new guidelines, organisation of stroke care system wordwide in different countries in order to promote better services and outcomes of patients with this devastating disease. New dedicated stroke centers have been developed with health care professionals involved in this health care system from patients´ transfer to hospitals, imaging, thombectomy, immediate and postprocedural care of patients. Despite recent advances and tremendous amount of research performed in this area, lots of unresolved questions and challenges remains to be answered in the future.

The aim of this work is to summarise a review of current knowledge in different topics of endovascular treatment in patients with acute ischemic stroke and represent author´s own experience with endovascular therapy with commented author´s publications in different areas in this topic.

Author has chosen 6 articles related to topic as a part of his thesis. Author´s contribution to these articles is summarised in these tables.

[1][2] Harsany J, Haring J, Hoferica M, Mako M, Janega P, Krastev G, Klepanec A. Aspiration thrombectomy as the first-line treatment of M2 occlusions. Interventional Neuroradiology [online]. 2020, 159101992092567.

Experimental work (%)	Supervision (%)	Manuscript (%)	Research direction (%)
-	70	50	50

[2] Klepanec A, Harsany J, Haring J, Mako M, Hoferica M, Rusina M, Cisar J, Krastev G. Endovascular treatment of acute ischemic stroke in patients with recurrent intracranial large vessel occlusion. Interventional Neuroradiology [online]. 2020, 1591019920911532.

Experimental work (%)	Supervision (%)	Manuscript (%)	Research direction (%)
-	70	50	50

[3] Klepanec A, Salat D, Harsany J, Hoferica M, Krastev G, Haring J, Mako M, Janega P, Janosikova L, Lehotska V. Neurointerventionalist and Patient Radiation Doses in Endovascular Treatment of Acute Ischemic Stroke. Cardiovascular and Interventional Radiology. 2020, 43(4), 604–612.

Experimental work (%)	Supervision (%)	Manuscript (%)	Research direction (%)
20	50	60	60

[1] The commentary must correspond to standard expectations in the field and must include a brief characteristic of the investigated matter, objectives of the work, employed methodologies, obtained results and, in case of co-authored works, a passage characterising the applicant's contribution in terms of both quality and content.
[2] Bibliographic record of a published scientific result, which is part of the habilitation thesis.

[4] Haring J, Krastev G, Vulev I, Klepanec A, Mako M, Kucharík M, Bažík R, Balázs T, Haršány J, Lackovič R, Mokošová, Zajíčková I, Beňová Ľ., Števková Z, Kovácsová Ž, Došeková P, Cisár J, Cabúková M, Vomastová M. Výsledky BATTS registra mechanických trombektómií akútnej ischemickej cievnej mozgovej príhody. Kardiológia pre prax. 2016, 14(3), 104-111.

Experimental work (%)	Supervision (%)	Manuscript (%)	Research direction (%)
-	30	10	30

[5] Haršány J, Hoferica M, Rusina M, Haring J, Mako M, Krastev G, Klepanec A. Zobrazovanie u pacientov s akútnou ischemickou cievnou mozgovou príhodou. Slovenská rádiológia. 2020, 27(1-2), 61-69.

Experimental work (%)	Supervision (%)	Manuscript (%)	Research direction (%)
-	70	50	-

[6] Madaric J, Vulev I, Klepanec A, Urlandova T, Balazs T, Hladikova D, Bazik R, Margitfalviova J, Liska B. Carotid artery stenting in octogenarians in high volume centre. Cardiology Letters. 2013, 22(2), 109–114.

Experimental work (%)	Supervision (%)	Manuscript (%)	Research direction (%)
20	-	40	10